



## Application for Commercial Pesticide Applicator License

Please complete an application for each candidate by typing or printing the requested information and check all boxes that apply. Enclose any required reports, insurance affidavits and application for firm license. Then mail the completed form with a check payable to Treasurer, State of Maine to this address: Board of Pesticides Control, 28 State House Station, Augusta, ME 04333-0028

Please fill in any blanks and correct any information that has changed. Check here if anything has changed ☐

Name

Social Security #

Date of Birth

Home Phone

E-mail Address

Home Address

Town/City

State

Zip Code

Company or Agency

Federal ID # *Required*

Business Phone

E-mail Address

Business Mailing Address

City

State

Zip Code

Signature of Licensee

Title

Signature of Supervisor

Title

### All Applicants must complete Sections 1 - 3

#### Section 1 Application For: *(Note: No fees for governmental applicators)*

☐ Initial License \$70.00 fee

☐ Replacement License \$5.00 fee

☐ License Renewal \$70.00 fee

☐ Updated License (add category / upgrade) \$5.00 fee

#### Section 2 Qualification For: *(Note: Does not apply to Household Pet, Antifouling Paint, or Post Harvest Treatment applicators.)*

☐ Operator

☐ Master

#### Section 3 Type of License:

☐ Governmental

☐ Custom Applicator for Hire

☐ Custom Applicator not for hire

**Please turn over and complete other side**

**Company / Agency owner, manager or master must complete Section 4.  
"For hire" Companies must complete Section 5.**

**Section 4a Annual Summary Reports**

- ☐ Have been submitted
- ☐ Are enclosed
- ☐ None performed

**Section 4b Insurance Affidavit**

- ☐ Affidavit enclosed
- ☐ Previously submitted
- ☐ Not required (not for hire)

**Section 5 Type of Company: ("For hire" companies only)**

**Section 5a** ☐ Only apply pesticides on or within a premises which is company owned or leased  
(This type of company need not apply for a firm license.)

**Section 5b** ☐ Sole Proprietor with NO employees that apply pesticides  
(This type of company need not apply for a firm license.)

**Section 5c** ☐ Sole Proprietor with employees that apply pesticides

☐ Incorporated    ☐ Partnership  
(These companies must include an application for a firm license)

**For Board Use Only**

Fee Required

Fee Paid

Check #

Check Date

CheckAmount

Date Tested

Exam(s)

Certification Expiration Date

Category(ies)

Extend Certification To:

Master Applied

Company ID #

Ins. Aff

Spray Rpt

License Type License #

Audit #

Date Sent

Issue Date

New Expiration Date